

PART B—ISSUE FEE TRANSMITTAL

Complete and sign this form, together with applicable fees, to:

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142-1320 AS

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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

FRISHAUF HOLTZ GOODMAN LANGER & CHICK
767 THIRD AVENUE-25TH FLOOR
NEW YORK NY 10017

OCT 01 1998

15

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Certificate of Mailing

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

Villani

(Depositor's name)

Villani

(Signature)

Sept. 23, 1998

(Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/892,482	07/14/97	006	BRIER, J	2775 06/24/98
First Named Applicant		MINORU USUI		

TITLE OF INVENTION GRAY SCALE LIQUID CRYSTAL DISPLAY (AS AMENDED)

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
2 920276D2C/LH	345-089.000	FBB	UTILITY	NO	\$1320.00	09/24/98

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

1 FRISHAUF, HOLTZ,
GOODMAN, LANGER &
2 CHICK

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

- Issue Fee
 Advance Order - # of Copies _____

(A) NAME OF ASSIGNEE Casio Computer Co., Ltd.

4b. The following fees or deficiency in these fees should be charged to:

DEPOSIT ACCOUNT NUMBER 06-1378

(ENCLOSE AN EXTRA COPY OF THIS FORM)

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(B) RESIDENCE: (CITY & STATE OR COUNTRY) Tokyo, Japan

Please check the appropriate assignee category indicated below (will not be printed on the patent)

- individual corporation or other private group entity government

The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature) (Date)

Leonard Holtz 22,974

Sept. 23, 1998

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

10/08/1998 INSUVEIN 00000052 08892482

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